



**CITY OF FORT WORTH  
TEMPORARY STREET USE REQUEST FORM**

Only those temporary street closings not interfering with necessary traffic circulation and police or fire emergency vehicle routes shall be permitted.

ORGANIZATION REQUESTING STREET USE			DATE	
RESPONSIBLE OFFICIAL	ADDRESS	OFFICE PHONE	MOBILE PHONE	FAX
REASON FOR STREET USE: _____				
CHECK ALL THAT APPLY: <input type="checkbox"/> SIDEWALK <input type="checkbox"/> LOADING ZONE <input type="checkbox"/> PARKING LANE				
LIST NUMBER OF TRAVEL LANES TO BE USED _____		FULL STREET CLOSURE _____		
1ST STREET/LANE TO BE CLOSED (LIMITS)		FROM	TO	(BEGIN & END) DATE AND TIME OF CLOSURE
2ND STREET/LANE TO BE CLOSED (LIMITS)		FROM	TO	(BEGIN & END) DATE AND TIME OF CLOSURE
3RD STREET/LANE TO BE CLOSED (LIMITS)		FROM	TO	(BEGIN & END) DATE AND TIME OF CLOSURE
CLOSURE TIME COMMENTS:				

- MUST PROVIDE THREE (3) BUSINESS DAYS LEAD-TIME PRIOR TO STREET USE TO ALLOW TIME FOR PROCESSING STREET USE PERMIT
- PAY STREET USE PERMIT FEE IN THE AMOUNT OF \$50.00
- MUST PROVIDE A CERTIFICATE OF INSURANCE NAMING THE CITY OF FORT WORTH AS AN ADDITIONAL INSURED IN THE AMOUNT OF (\$1 MILLION GENERAL COMMERCIAL LIABILITY AND \$1 MILLION FOR ANY AUTO)
- ALL AFFECTED BUSINESSES AND OR RESIDENTS MUST BE PROVIDED ACCESS TO AND FROM THEIR PROPERTY DURING STREET CLOSURE
- MUST PROVIDE ADEQUATE TRAFFIC CONTROL DEVICES SUCH AS ADVANCED WARNING SIGNS, STANDARD BARRICADES AND/OR TRAFFIC CONES DURING STREET USE

TRANSPORTATION AND PUBLIC WORKS DEPARTMENT  
STREET PERMIT CENTER  
311 W. 10<sup>TH</sup> STREET  
FORT WORTH, TX 76102  
(817) 392-7894 FAX (817) 392-8941

## BASIC INSURANCE REQUIREMENTS FOR STREET USE PERMITS

The following items represent basic insurance requirements. Exceptions to the insurance requirements may be permitted, depending on the risk exposure in regards to respective services, products procured, or contractual terms, to name a few.

1. Commercial General Liability (CGL) Insurance Policy  
\$1,000,000 Each occurrence  
\$2,000,000 Aggregate limit
2. Automobile Liability Insurance Policy  
\$1,000,000 Each accident on a combined single limit basis  
or  
\$250,000 Property Damage  
\$500,000 Bodily Injury per person per occurrence

**A commercial business policy shall provide coverage on "Any Auto", defined as autos owned, hired and non-owned.**

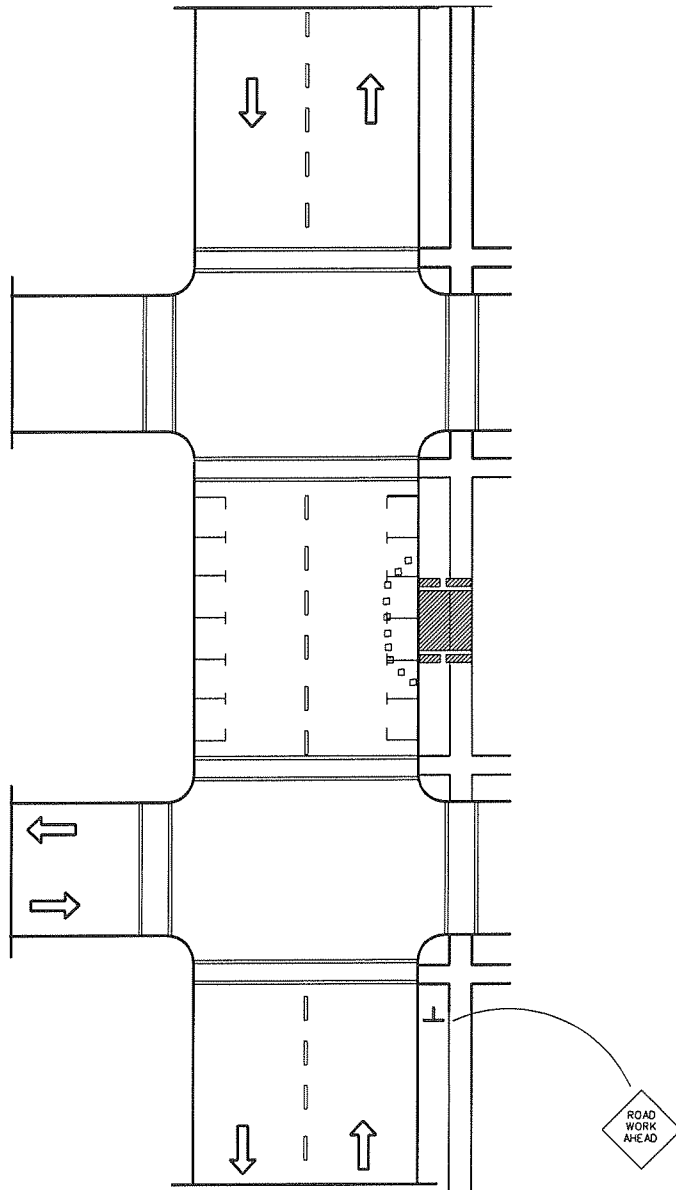
3. Policy Endorsements as follows:

- The City of Fort Worth, its Officers and Employees named as an Additional Insured Address:  
**Street Permit Center**  
311 W. 10<sup>th</sup> Street  
Fort Worth, Texas 76102
- Forty-five (45) days notice of cancellation or non-renewal. It would be advantages to the City to require the following clause:  
  
"This insurance shall not be cancelled, limited in scope or coverage, cancelled or non-renewed, until after forty-five (45) days prior written notice has been given to the City of Fort Worth".
- Waiver of rights of recovery (subrogation) in favor of the City of Fort Worth.

4. The insurers for all policies must be licensed/approved to do business in the State of Texas and have minimum rating of A: VII in the current A. M. Best Key Rating Guide or have reasonably equivalent financial strength and solvency to the satisfaction of the Risk Manager.
5. The deductible or self-insured retention (SIR) affecting required insurance coverage shall be acceptable to the Risk Manager of the City of Fort Worth in regards to asset value and stockholders' equity. In lieu of traditional insurance, alternative coverage maintained through insurance pools or risk retention groups must also be approved.

M "P-2"

DATE: 12/11/02



This plan is submitted for TCP. I certify this plan will be used for the following location(s):  
\_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_  
and that all channelizing devices will conform to "General Notes" as shown on the back.

Signature:

Date:

CITY OF FORT WORTH  
TRANSPORTATION  
AND  
PUBLIC WORKS

SIDEWALK CLOSURE DETOUR

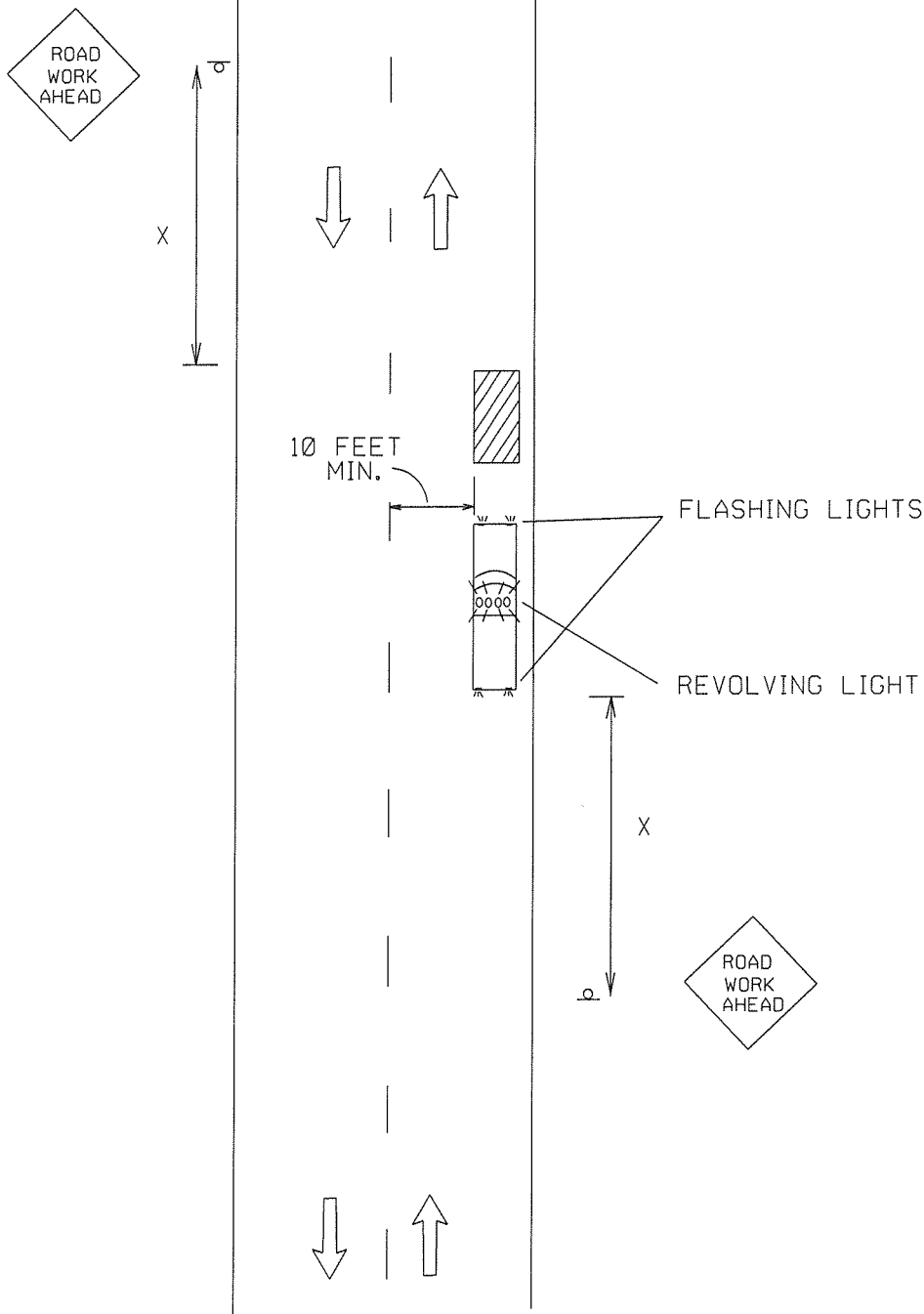
Note:

See reverse side for General Notes and Device Spacing.

M "P-2"

M "220 A"

DATE: 12/11/02



This plan is submitted for TCP. I certify this plan will be used for the following location(s):

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
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Signature:

Date

CITY OF FORT WORTH  
TRANSPORTATION  
AND  
PUBLIC WORKS

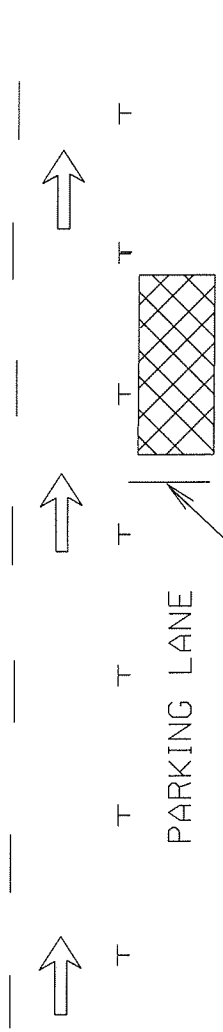
TYPICAL TWO WAY STREET - LOW SPEED  
SHORT DURATION - 1 HOUR OR LESS

Note:  
See reverse side for General Notes and Device Spacing

M "220 A"

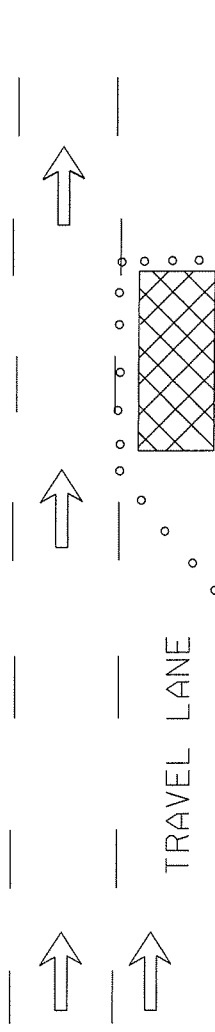
M "310"

DATE: 12/11/02

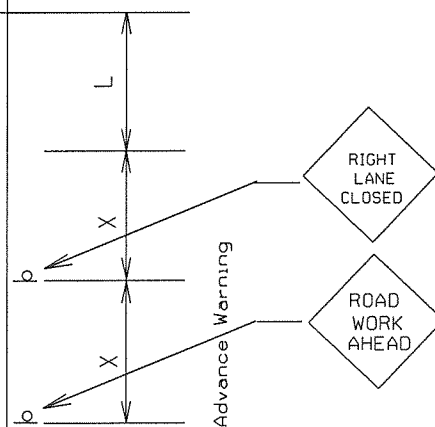


TYPE 1  
BARRICADE

DUMPSTER IN  
PARKING LANE



DUMPSTER IN  
TRAVEL LANE



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\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
and that all channelizing devices will conform to "General Notes" as shown on the back.

Signature: \_\_\_\_\_

Date \_\_\_\_\_

CITY OF FORT WORTH  
TRANSPORTATION  
AND  
PUBLIC WORKS

### TYPICAL LAYOUT FOR DUMPSTER

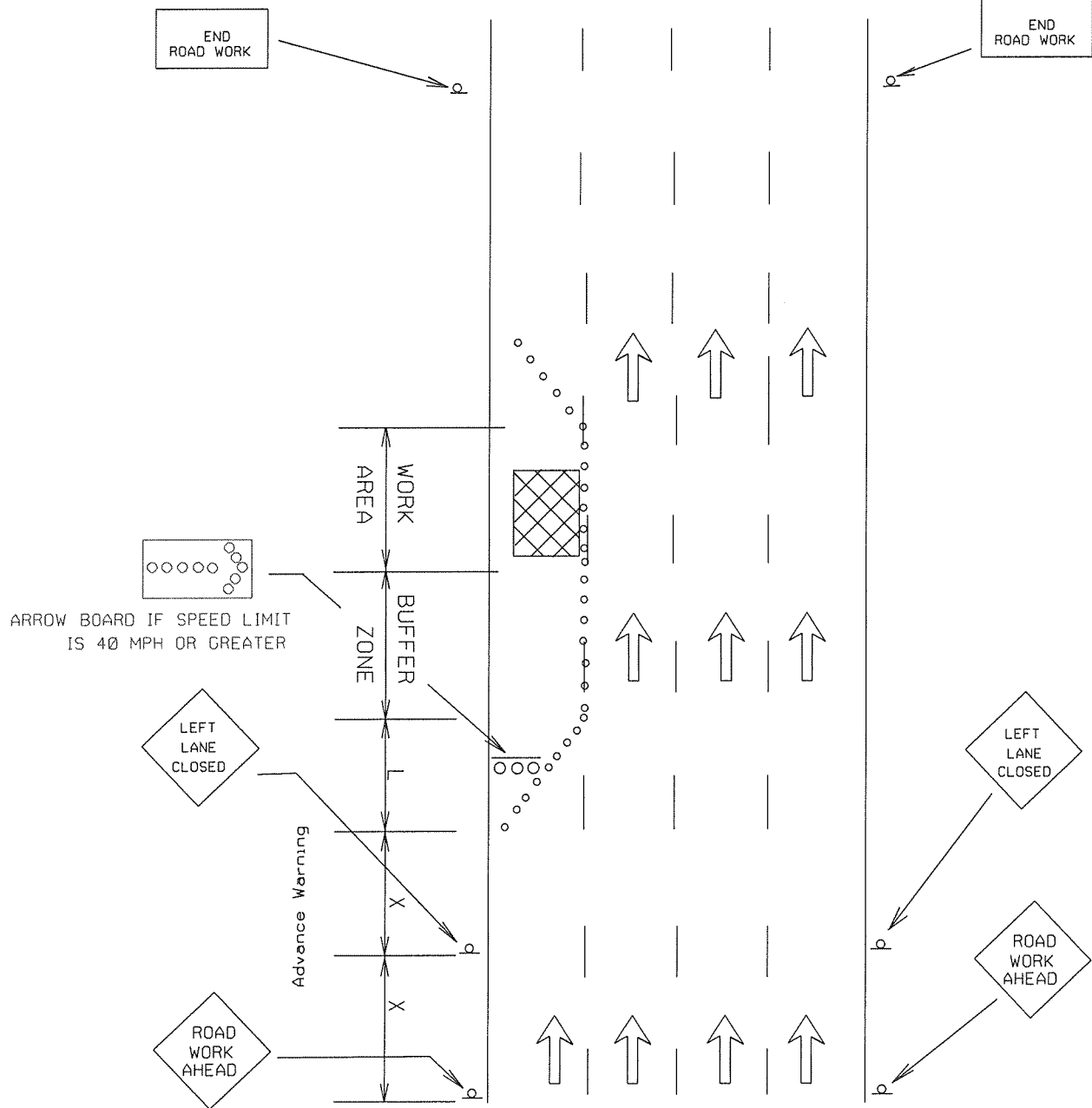
Note:

See reverse side for General Notes and Device Spacing

M "310"

M "141L"

DATE: 12/11/02



This plan is submitted for TCP. I certify this plan will be used for the following location(s):

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Signature:

Date

CITY OF FORT WORTH  
TRANSPORTATION  
AND  
PUBLIC WORKS

TYPICAL ONE WAY MULTIPLE LANE STREET  
ONE LEFT LANE CLOSURE

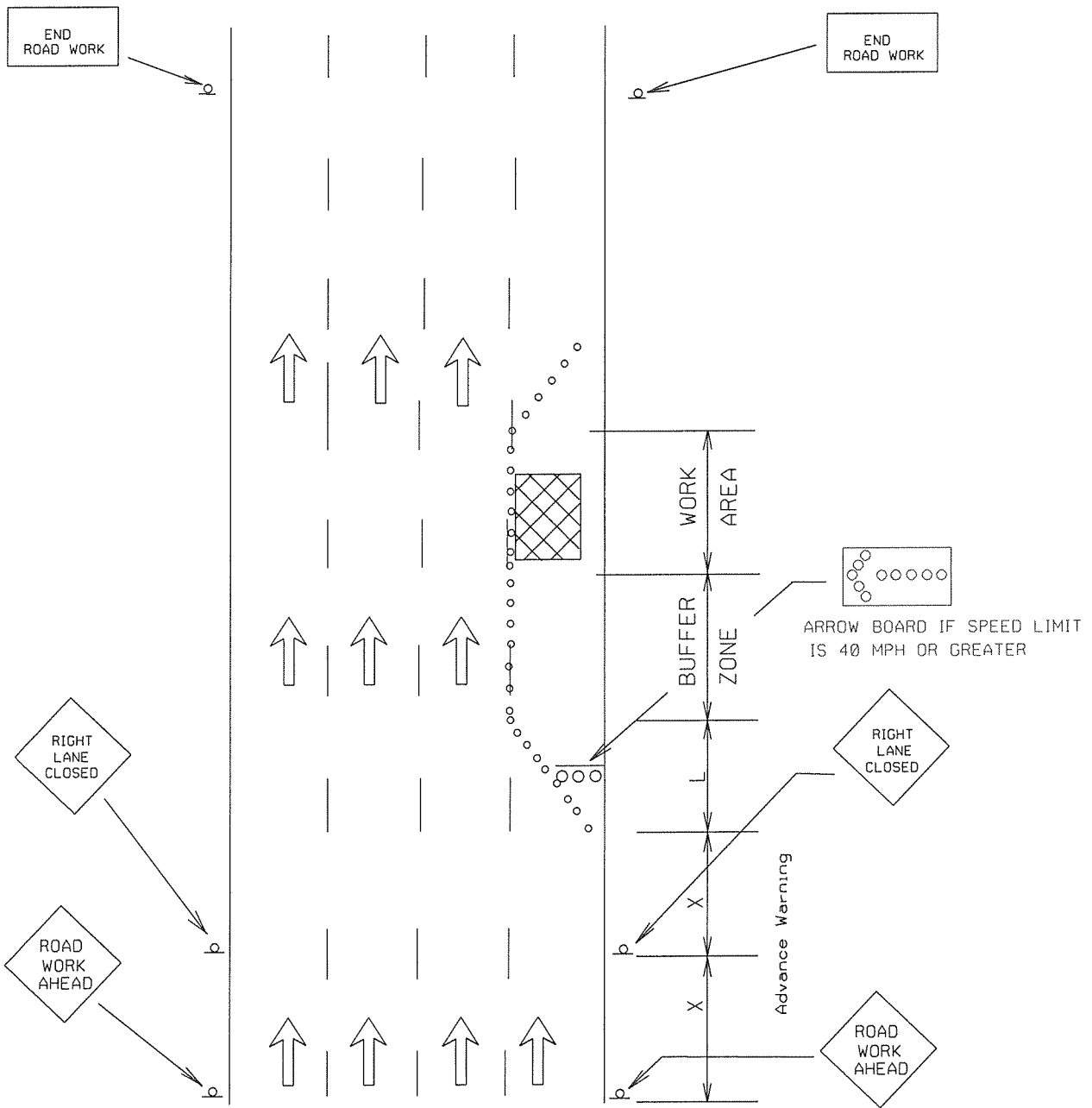
Note:

See reverse side for General Notes and Device Spacing

M "141L"

M "141R"

DATE: 12/11/02



This plan is submitted for TCP. I certify this plan will be used for the following location(s):

and that all channelizing devices will conform to "General Notes" as shown on the back.

Signature:

Date

CITY OF FORT WORTH  
TRANSPORTATION  
AND  
PUBLIC WORKS

TYPICAL ONE WAY MULTIPLE LANE STREET  
ONE RIGHT LANE CLOSURE

Note:

See reverse side for General Notes and Device Spacing

M "141R"

## "GENERAL NOTES"

1. All channelizing devices shall be in accordance with the current edition of the Texas Manual on Uniform Traffic Control Devices.
2. All Traffic Control Devices shall have working visible warning lights as required in accordance with the current edition of TMUTCD.
3. For **Temporary Situations**, when it is not feasible to remove and restore pavement markings, channelization must be made dominant by using a very close device spacing. This is especially important in locations of conflicting information, such as where traffic is directed over a double yellow centerline. In such locations, channelizing device spacing of **10 feet** is required.
4. For **Long Term Stationary** work, all conflicting pavement markings must be removed and centerline striping provided where two way traffic is in adjacent lanes.
5. Contractor shall provide sidewalk closure, crosswalk closure and/or walkway bypass wherever pedestrian movements are affected by construction activities. All sidewalks and crosswalks shall be accessible when contractor is not working unless otherwise approved by the City Traffic Engineer.
6. The use of trailer mounted **ARROW DISPLAYS** may be required on all lane closures. The contractor shall provide one (1) stand-by unit in good working condition at the job site, ready for use, if his operation requires 24-hour a day closure set-ups and if required.
7. City Traffic Engineer and/or Inspectors may require additional traffic control devices.

**TYPICAL TRANSITION LENGTHS AND  
SUGGESTED MAXIMUM SPACING OF DEVICES**

Posted Speed MPH	Formula*	Minimum Desirable Taper Lengths (L) Feet			Suggested Maximum Device Spacing		Suggested Sign Spacing (Feet)
		10' Lane Offset	11' Lane Offset	12' Lane Offset	On a Taper (Feet)	On a Tangent (Feet)	"X" Dimension
30	$L = \frac{WS^2}{60}$	150	165	180	30	60-75	120
35		205	225	245	35	70-90	160
40		265	295	320	40	80-100	240
45	L=WS	450	495	540	45	90-110	320
50		500	550	600	50	100-125	400

\*L= Taper length in feet

W= Width of offset in feet

S= Posted speed

**Note: Buffer Zone will be 25 feet (maximum).**

